

2006 AUG -4 PM 12: 45

**COUNTY OF SAN DIEGO  
VOLUNTEER REPORT FORM  
PERIOD JULY 1, 2005 - JUNE 30, 2006**

THOMAS J PASTUSZKA  
CLERK OF THE BOARD  
OF SUPERVISORS

**1. DEPARTMENT/COURT INFORMATION:**

Department/Court: HHSA

Division/Unit: Strategic Planning & Operational Support

**2. VOLUNTEER PROGRAM BENEFITS:**

- a. GENERAL VOLUNTEERS (this section should include community volunteer, student intern, groups, corporations, etc.)

No. Vol.	<u>2</u>	Hours	<u>630</u>	x	<u>\$18.04</u>	=	<u>\$11,365.20</u>
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Types of work performed by GENERAL VOLUNTEERS in this category:

Student intern conducted research, interviewed staff, wrote a report. GIS: map updating, geocoding

- b. INSTITUTIONAL VOLUNTEERS (this section should include court referrals, honor camp inmates, PIC/RETC, GAIN, etc.)

No. Vol.	<u>          </u>	Hours	<u>          </u>	x	<u>\$18.04</u>	=	<u>          </u>
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Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

- c. SPECIALIZED VOLUNTEERS (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity). These specialized positions have verifiable compensation levels (VCL). If you have such a volunteer, please indicate the position, hours and compensation level below.

<u>          </u> Position <u>          </u>	<u>          </u> Hours <u>          </u>	x	<u>          </u> VCL <u>          </u>	=	<u>          </u> Dollar Benefit <u>          </u>
<u>          </u>	<u>          </u>	x	<u>          </u>	=	\$ <u>          </u>

No. Vol	<u>          </u>	Total Hours	<u>          </u>	Total Value	\$ <u>          </u>
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Types of work performed by SPECIALIZED VOLUNTEERS in this category:

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

<u>No. of Volunteers</u>	<u>Hours</u>	<u>Dollar</u> <u>Benefit</u>
2a: <u>2</u>	<u>630</u>	\$ <u>11,365.20</u>
2b: _____	_____	\$ _____
2c: _____	_____	\$ _____

TOTALS: <u>2</u>	<u>630</u>	\$ <u>11,365.20</u>
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3. DONATIONS TO VOLUNTEER PROGRAM:

Please list all donations to the department's Volunteer Program including monetary donations and tangible/intangible items. Items such as computers, air time, transportation, books, etc. Please assign a fair market value to each and add to the total value of the donations section.

<u>Item Donated</u>	<u>Value</u>	<u>Item Donated</u>	<u>Value</u>
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

TOTAL VALUE \$
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4. VOLUNTEER PROGRAM COSTS:

- a. Cost of direct supervision of volunteers (total hours of direct supervision times hourly rate of staff person(s) directly supervising program volunteers.

Hours \_\_\_\_\_ x Rate \$ \_\_\_\_\_ =

\$ <u>1278.20</u>
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- b. Cost of program coordination (total hours of program coordination times hourly rate of coordinator(s)). This section should include coordination of staff, compiling statistics, job description preparation, volunteer placements and recognition, etc.

Hours \_\_\_\_\_ x Rate \$ \_\_\_\_\_ =

\$
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- c. Other program costs (volunteer training materials/supplies, recognition costs, etc.):

Item	Cost
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL OF OTHER PROGRAM COSTS

=

\$

- d. TOTAL OF VOLUNTEER PROGRAM COST =  
(add 4a, 4b, and 4c)

\$ 1278.20

**5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:**

- a. Total Dollar Benefits of Volunteers, Item 2d (Page 2) \$ 11,365.20
- b. Total of Donations to Volunteer Program, Item 3 (Page 2) \$
- ADD a + b \$
- c. Subtract Total of Volunteer Program Costs, Item 4d (Page 3) (\$ 1278.20)
- TOTAL PROGRAM BENEFIT \$ 10,087

6. **RECRUITING:**

Please describe your recruiting programs:

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7. **SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:**

Please describe any special activities and/or achievements your program was involved in during the period of this report:

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8. **VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2006-07:**

Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

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9. **GENERAL INFORMATION:**

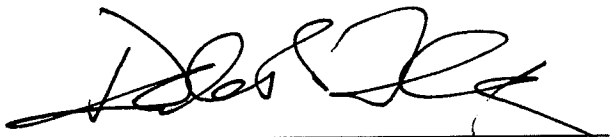
Name of Person Completing Report:

Phone Number: Steve Gardner Mail Stop P509 E-Mail: Steve.Gardner@sdcounty.ca.gov

Volunteer Coordinator:

Phone Number: \_\_\_\_\_ Mail Stop \_\_\_\_\_ E-Mail \_\_\_\_\_

10. **DEPARTMENT CERTIFICATION:**

  
DEPARTMENT HEAD SIGNATURE

DATE

7/21/06